



**AIR FORCE ASSOCIATION  
AEROSPACE EDUCATION FOUNDATION  
CIVIL AIR PATROL AEROSPACE EDUCATION GRANT**



**DIRECTIONS:** Please type or print the following information:

**AEROSPACE EDUCATION OFFICER INFORMATION**

Aerospace Education Officer's Name			CAPSN	E-mail Address
Last	First	Middle Initial		
Squadron Name				Squadron Telephone Number
Squadron Address				Squadron Fax Number
Street	City	State	Zip Code	

**THE PURPOSE / OBJECTIVES OF THE GRANT**

How will the grant money be used?			
What aerospace education objectives will you be able to achieve with this grant?			
Please list your unit's previous aerospace education activities (continue on separate sheet if necessary):			
Requested Funds (May receive up to \$250.00)	Number and age of students to benefit from the grant		
Please list the name, address, telephone number, and contact person of the organization you will be visiting. (This only applies if you are going outside of the unit on a field trip, for example, to visit a museum, airport, Air Force base, etc.)			
Contact Person	Telephone Number		
Address			
Street	City	State	Zip Code

**VERIFICATION**

Signature of Unit Commander	Printed Name of Unit Commander
Signature of Unit Aerospace Education Officer	Date

**MAIL OR FAX DOCUMENTS TO:**

HQ CAP / ETA  
105 South Hansell Street / Building 714  
Maxwell Air Force Base  
Alabama 36112-6332



Application for ☐ winter -- due 31 December  
☐ summer -- due 30 June

IF YOU HAVE ANY QUESTIONS:

Telephone: 334 - 953 - 5095

Fax number: 334 - 953 - 4235

E-mail: [bspink@capnhq.gov](mailto:bspink@capnhq.gov)